

**COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION**

As a below named inventor, I (we) hereby declare that:

My residence, post office address and citizenship are the same as stated below next to my name.

I (we) believe I am (we are) an original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**Method and Device for Improving Cardiac Function**

the specification of which (check one)

☒ is attached hereto.

☐ was filed on \_\_\_\_\_ as Application Serial No. \_\_\_\_\_  
and was amended on \_\_\_\_\_ (if applicable).

☐ was filed as PCT International application No. \_\_\_\_\_ on \_\_\_\_\_  
and was amended on \_\_\_\_\_ (if applicable).

I (we) hereby state that I (we) have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I (we) acknowledge the duty to disclose information known to me to be material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I (we) hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Number	Country	Filing Date (mm/dd/yyyy)	Priority Claimed
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

W07-473

I (we) hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

<u>Number</u>	<u>Filing Date (mm/dd/yyyy)</u>
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I (we) hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulation, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

<u>Application Serial No.</u>	<u>Filing Date (d/m/y)</u>	<u>Status (Patented, Pending, Abandoned)</u>
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I (we) hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Henry D. Coleman, Reg. No. 32,559; R. Neil Sudol, Reg. No. 31,669;  
William J. Sapone, Reg. No. 32,518

all of  
COLEMAN SUDOL SAPONE, P.C.  
708 Third Avenue, Fourteenth Floor  
New York, NY 10017-4101

Direct all telephone calls to: R. Neil Sudol/Henry D. at Telephone No. (212) 679-0090  
Coleman/William J.  
Sapone

Address all correspondence to: R. Neil Sudol/Henry at  
Coleman/William J.  
Sapone

COLEMAN SUDOL SAPONE, P.C.  
708 Third Avenue, Fourteenth Floor  
New York, NY 10017-4101  
United States of America

W07-473

I (we) hereby declare that all statements made herein of my (our) own knowledge are true, and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor: Peter J. Wilk

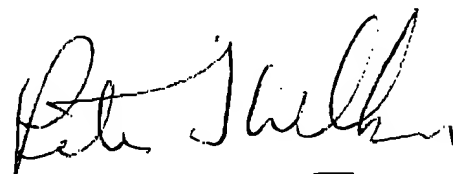
Residence: 185 West End Avenue  
New York, New York 10023

Post Office Address: Same as above

Country of Citizenship: United States of America

10/4/00

Date



Inventor's Signature

Full name of second inventor:

Residence:

Post Office Address:

Country of Citizenship:

Date

Inventor's Signature

W07-473

Applicant/Patentee : Peter J. Wilk  
Serial/Patent No. : Not Yet Assigned  
Filed/Issued : Herewith  
For : Method and Device for Improving Cardiac Function  
Attorney's Docket No. : W07-473

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS  
(37 CFR 1.9(f) and 1.27(c)) - SMALL BUSINESS CONCERN**

I hereby declare that I am

- ☐ the owner of the small business concern identified below:  
☒ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF CONCERN Wilk Patent Development Corporation  
ADDRESS OF CONCERN 160 Third Avenue, New York, New York 10003

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention, entitled:  
Method and Device for Improving Cardiac Function by inventor(s) Peter J. Wilk  
described in

- ☒ the specification filed herewith.  
☐ application serial no. \_\_\_\_\_, filed \_\_\_\_\_  
☐ patent no. \_\_\_\_\_, issued \_\_\_\_\_

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below\* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e). \*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27).

COLEMAN SUDOL SAPONE, P.C.  
708 Third Avenue, 14th Floor  
New York, New York 10017-4101  
(212) 679-0090

Cont'd.

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Verified Statement (Declaration) Claiming Small Entity Status  
(37 CFR 1.9(f) and 1.27(c)) - Small Business Concern

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Applicant/Patentee : Peter J. Wilk  
Serial/Patent No. : Not Yet Assigned  
Filed/Issued : Herewith  
For : Method and Device for Improving Cardiac Function  
Attorney's Docket No. : W07-473

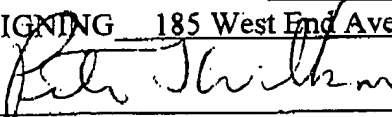
NAME OF CONCERN \_\_\_\_\_  
ADDRESS OF CONCERN \_\_\_\_\_

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patents issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING Peter J. Wilk, M.D.  
TITLE OF PERSON OTHER THAN OWNER President  
ADDRESS OF PERSON SIGNING 185 West End Avenue, New York, New York 10023

SIGNATURE 

DATE 10/4/00

COLEMAN SUDOL SAPONE, P.C.  
708 Third Avenue, 14th Floor  
New York, New York 10017  
(212) 679-0090